

DALY, CROWLEY, MOFFORD & DURKEE, LLP**Telephone: 781-401-9988
Facsimile: 781-401-9966****RECEIVED
CENTRAL FAX CENTER****FACSIMILE TRANSMITTAL SHEET****JUN 22 2006**Including this transmittal sheet, document consists of 3 pages.Date: June 22, 2006**To: Commissioner for Patents****From: Donald F. Mofford, Esq.****Examiner: Bernarr E. Gregory****Group Art: 3662****Company: U.S. PTO****Facsimile Number: 571-273-8300****Telephone Number:****MESSAGE**

RE: U.S. Patent Application of James T. Hanson et al.
Entitled: Video Amplifier For A Radar Receiver
Filed on: August 16, 2001
U.S. Appl. No.: 09/931,593
Our Ref. No.: RTN-144PUS

PLEASE CONFIRM RECEIPT OF THIS FACSIMILE TRANSMISSION.**THANK YOU.****STATEMENT OF CONFIDENTIALITY**

The documents included with this facsimile transmittal sheet contain information which is confidential and/or privileged. The information is intended to be for the use of the addressee named on this transmittal sheet. If you are not the addressee, note that any disclosure, photocopying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone (collect) immediately so that we can arrange for the retrieval of the original documents at no cost to you.

**IF THERE IS A PROBLEM WITH THIS TRANSMISSION, OR IF YOU DID NOT
RECEIVE ALL PAGES, PLEASE CALL 781-401-9988 AS SOON AS POSSIBLE**

\\server01\client_files\ProLaw documents\RTN-144PUS\31122.doc

RECEIVED
CENTRAL FAX CENTER

JUN 22 2006

PTO/SB/21 (09-04)

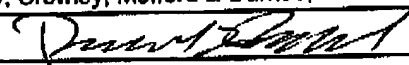
Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Patent Number	6,903,679	
	Issue Date	June 7, 2005	
	First Named Inventor	James T. Hanson	
	Art Unit	3662	
	Examiner Name	Bernarr E. Gregory	
Total Number of Pages in This Submission	2	Attorney Docket Number	RTN-144PUS


ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC Appeal Notice, Brief, Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks In the event a petition for extension of time is required by this paper and not otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Daly, Crowley, Mofford & Durkee, LLP		
Signature			
Printed name	Donald F. Mofford		
Date	6-22-06	Reg. No.	33,740

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Donald F. Mofford	Date	6-22-06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JUN 22 2006

PTO/SB/123 (01-06)

Approved for use through 12/31/2008. OMB 0851-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Patent**Address to:
Mail Stop Post Issue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Patent Number	6,903,679
Issue Date	June 7, 2005
Application Number	09/931,593
Filing Date	August 16, 2001
First Named Inventor	James T. Hanson
Attorney Docket Number	RTN-144PUS

Please change the Correspondence Address for the above-identified patent to:

☒ The address associated with Customer Number:

33164

OR

☐ Firm or Individual Name Donald F. Mofford

Address Daly, Crowley, Mofford & Durkee, LLP, 354A Turnpike Street, Suite 301A

City Canton

State MA

ZIP 02021-2714

Country USA

Telephone 781-401-9988 X13

Email dfm@dc-m.com

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

I am the:

- ☐ Patentee.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 33,740

Signature

Typed or Printed Name Donald F. Mofford

Date

6-22-06

Telephone 781-401-9988 X13

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.